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October 18, 2012

VIA HAND DELIVERY

Ms. Patricia Young
Office of Public Disclosure
Federal Election Commission
999 E Street, NW
Washington, D.C. 20463

RE: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

Enclosed please find a Statement of Organization (FEC Form 1) for Independence USA PAC.

This committee intends to make unlimited independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Diane Gabelli

Treasurer, Independence USA PAC

FEC FORM 1

Only

STATEMENT OF **ORGANIZATION**

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(Revised 02/2009)

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ADDRESS (number and street) (Check if address is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL. ADDRESS (Please provide only one e-mail address) (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 10 18 2012 2. DATE FEC IDENTIFICATION NUMBER IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Diane Gubelli Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact: Federal Election Commission Toll Free 800-424,9530 Local 202-694-1100 Office FEC FORM 1 Use

	FEC Fo	rm 1 (Revised 02/2009) Page 2					
j.		TYPE OF COMMITTEE					
	(a)	e Cemmitae: This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate	<u> </u>					
	Candidate Party Affiliati	on Office Sought: House Senate President District					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate						
	Party Con	nmittee: (Democratic,					
	(d)	This committee is a cratical, State or subordinate) committee of the Republican, etc.) Party.					
	Political A	ction ¢emmittee (PAC):					
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
		Corporation w/o Capital Stock Labor Organization					
		Membership Organization Tiddle Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
	(f) ×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, this committee is a Labbyist/Registrant PAG.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint Fundraising Representative:						
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political					
	لــا	committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID mumber C					
	2.	FEC ID number C					
	3.	FEC ID number C					
	4.	FEC ID number					

			•	
FEC Form 1 (Revis	sed 02/2009)			Page 3
Write or Type Committee N	lame			
Independen	ce USA PAC			
6. Name of Any Connects	ed Organization, Affiliated Comm	littee, Joint Fundraising I	Representative, or Le	adership PAC Sponsor
Mailing Address		111111		
				البيا-البيب
	CITY		STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Co	mmittee Joint Fundral	Ising Representative	Leadership PAC Sponsor
· · · · · · · · · · · · · · · · · · ·	Juliano o		ionig Hoprocontauto	
7. Custodian of Records:	Identify by name, address (phone	number optional) and p	position of the person	in possession of committee
oooks and records.				
Full Name Dia	ane Gubelli			
Mailing Address	909 Third Aven	iue		
	15th Floor		1 1 1 1 1 1	
	New York		NY 1	0022 - , , ,
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Title or Position	CITY		STATE	ZIP CODE
Custodian of	Records	Telephone	number 212	_[583_]_[6000]
8. Treasurer: List the mame any designated agent (e.	e and address (phone number op .g., assistant (reasurer).	ptional) of the treasurer of	f the committee; and t	he name and address of
Full Name	ane Gubelli			
or ireasurer La	909 Third Aven		<u> </u>	
Mailing Address	4 m 40	YY		<u>- </u>
:	15th Fleor		NIV 4	9900
!	New York	111111		<u> </u>
Title or Position ,	CITY		STATE	ZIP CODE
Treasurer		Telephone	number 212	- [583] - [6990 _]

FEC Form	1 (Revised 02/2009)		Page 4				
Full Name of Designated Agent							
Mailing Address							
	CITY	STATE	ZIP CODE				
Title or Position							
	Telephone n	umber 🗀					
	repositories: List all banks or other depositories in which the commes or maintains funds.	nittee deposits	funds, holds accounts, rents				
Name of Bank, De	Name of Bank, Depository, etc.						
ļ	U.S.,Trust, Bank of America Private	wealth	Management , , ,				
Malling Address	1114 W. 47th St.						
	6th Flogr	1111					
	[New York	NY	[10036]				
	CITY	STATE	ZIP CODE				
Name of Bank, Do	pository, etc.	•	·				
1			1				
			<u> </u>				
Mailing Address		111,1					
	<u> </u>						
		لبا	لــــا-لـــــا				
	СПУ	STATE	ZIP CODE				

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
Land Delivered	Date of Receipt			
Hand Delivered	16/18/12			
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No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Ne	xt Business Day Delivery			
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Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
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PRÉPARER	DATE PREPARED			
(3/2005)				